

POLICY AND COMMUNICATIONS BULLETIN

THE CLINICAL CENTER

Medical Administrative Series

M81-2 (rev.)

2 September 1997

MANUAL TRANSMITTAL SHEET

SUBJECT: Disclosure of Patient Information to Third Parties

1. Explanation of Material Transmitted: This Medical Administrative Series issuance identifies the types of patient information that may be released without prior authorization from the patient and sets forth the procedures for responding to press, radio, and television inquiries regarding patients. (See also MAS issuance No. 92-11, "Release of Information to the Media.") The policy was reviewed by the Medical Executive Committee on 2 September 1997 and approved with changes.
2. Material Superseded: MAS No. 81-2 (rev.), dated 26 March 1987
3. Filing Instructions: "Other" Section

Remove: No. 81-2 (rev.), dated 26 March 1987

Insert: No. M81-2 (rev.) dated 2 September 1997

DISTRIBUTION

Physicians, Dentists and Other Practitioners Participating in
Patient Care

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POLICY

The unauthorized disclosure of information pertaining to a Clinical Center (CC) patient or research volunteer is prohibited by the Privacy Act of 1974. As a rule, to release such information, the patient or the patient's duly authorized representative must provide written authorization (Form NIH-527, "Authorization for the Release of Medical Information"). All CC personnel shall respect each patient's expectation that records and other material pertaining to medical care will be treated as confidential. In general, one should refer all requests for the release of information from the CC medical record or other sources to the Medicolegal Section of the Medical Record Department, CC. However, in cases where referral is impractical, one should release the minimum amount of information necessary in response to the request. The same discretion should be used when releasing information to the family or friends of a CC patient.

Only the following information may be released without prior written authorization from the patient or the patient's authorized representative:

- a. Verification of an individual as a patient (including dates of treatment, past or present), and
- b. General condition of the patient (e.g., good, fair, stable, serious, or critical).

In general, it is not possible to comply with a patient's request for the complete restriction of information or anonymity.

Since the hospital location of the patient may be indicative of a diagnosis, the nursing unit, room number, clinic, or telephone number shall be released with discretion. For example, the Admissions desk should be free to direct visitors to a patient's room or give family members a telephone number without reference to Institute or physician.

Press, radio, or television inquiries may represent a particularly sensitive type of third party disclosure. As such, any inquiries of this type, regarding CC patients or staff, are to be referred immediately to the Chief of Clinical Center Communications (CCC), CC, or designee. If the Chief, CCC, or designee is not available, such as after hours or on weekends, the CC senior administrator on call should be contacted. (See also MAS issuance No. 92-11, "Release of Information to the Media.")

EXCEPTIONS

There are certain exceptions to this policy. For a full explanation, contact the Chief, Medical Record Department. However, it is important to note that the disclosure of confidential information is permitted:

- a. When the request comes from a police officer or when the information requested comes under statutory regulations that require that the hospital report certain information;
- b. When compelling circumstances occur that affect a person's health or safety.

However, all such requests must be referred to the Medicolegal Section or Office of the Chief, Medical Record Department, CC.